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**FACSIMILE COVER SHEET**

DATE: FEBRUARY 19, 2004

NUMBER OF PAGES (INCLUDING  
THIS TRANSMITTAL COVER SHEET): 12

TIME:

YOUR REFERENCE: 09/998,603

OUR REFERENCE: 306045

to: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

FACSIMILE NUMBER: (703) 872-9306

FROM: ROGER D. WYLIE

DIRECT LINE: (206) 521-5984

In re Application of:

HARDEE, et al.

Application No. 09/998,603

Filed: November 16, 2001

For: TENT CORNER CONSTRUCTION

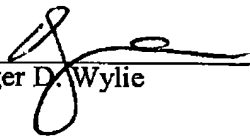
Group Art Unit: 3637

Examiner: Wilkens, Janet Marie

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Date: February 19, 2004

  
Roger D. Wylie

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FORM PTO-1083

**PATENT**

Attorney Docket No. 306045  
 Client Reference No. Orgtnt-2-3841  
 Date: February 19, 2004

In re Application of: Hardee et al.  
 Application No. 09/998,603  
 Filed: November 16, 2001  
 For: Tent Corner Construction

Mail Stop  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a response to an office action in the subject application.

- ☐ Applicants claim small entity status of this application under 37 CFR 1.27.
- ☐ Petition for Extension of Time
- ☐ Applicants petition for a one-month extension of time under 37 CFR 1.136, the fee for which is \$110.00 (enclosed).
- ☐ Applicants believe that no petition for an extension of time is necessary. However, to the extent that such petition is deemed necessary, Applicants hereby petition for a sufficient extension of time to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.
- ☐ No additional claim fee is required.
- ☐ Other:

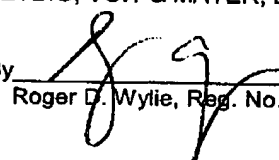
The claim fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADDIT. CLAIM FEE	RATE	ADDIT. CLAIM FEE
TOTAL	33	MINUS	29	=4	x 9=	\$	x 18=	\$72.00
INDEPENDENT	4	MINUS	3	=1	x 42=	\$	x 86=	\$86.00
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 140=	\$	+ 280=	\$
					TOTAL	\$	TOTAL	\$158.00

- ☒ Please charge my Deposit Account No. 12-1216 in the amount of \$158.00. A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$ is attached.
- ☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,  
 LEYDIG, VOIT & MAYER, LTD.

Leydig, Voit & Mayer, Ltd.  
 1420 Fifth Avenue, Suite 2200  
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By   
 Roger D. Wylie, Reg. No. 36,974

Amendment or ROA Transmittal (Revised 5/1/03)

FORM PTO-1083

PATENT

Attorney Docket No. 308045  
 Client Reference No. Orgnt-2-3841  
 Date: February 19, 2004

In re Application of: Hardee et al.  
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